The Society for Healthcare Epidemiology of America appreciates the opportunity to submit testimony to the Committee and would like to share our deep concern about the growing Ebola Virus Disease (EVD) outbreak in West Africa and the burden this outbreak is putting on US hospitals and other healthcare facilities in their preparedness efforts to protect the American public against the spread of Ebola domestically.

SHEA represents over 2,000 epidemiologists, infection preventionists, hospitalists, pharmacists, microbiologists and others healthcare professionals involved in infection prevention globally. SHEA’s mission and the passion of our members are to prevent and control healthcare-associated infections. Our members are responsible for creating the outbreak plans healthcare settings use to respond appropriately to Ebola Virus Disease (EVD) and other harmful viruses that spread in the population.

SHEA supports the federal government plan to have a well-coordinated, science-driven response cutting across multiple agencies to address the outbreak in West Africa and to prevent the spread of Ebola in the United States. As a result, SHEA fully supports the Administration’s request for emergency funding of $6.18 billion in order to continue this response plan. We urge that this supplemental funding not come at the expense of other infectious diseases programs, so that preparedness and response efforts for future outbreaks are not undermined.

Specifically, we urge the approve for of the request for emergency funding of $1.83 billion for the Center for Disease Control and Prevention (CDC) to fortify public health systems and advance US preparedness to support Ebola Treatment Centers. In recent months, SHEA has worked very closely with the CDC to provide healthcare epidemiology specialists as part of the Rapid Ebola Preparedness (REP) team visits to assess US health care facilities’ readiness. We support this approach and would urge continued support for the CDC and for these facilities through state and local health departments. We also strongly support that financial resources be dedicated to the healthcare facilities designated as Ebola Treatment Centers. These facilities must use resources from other areas of patient care to bolster their ability to meet the added requirements of this distinction, while still protecting the public health and safety of their community. SHEA endorses the recent infection prevention guidance issued by the CDC, and
the commitment healthcare facilities across the country have made to train and prepare their teams for the care of patients with EVD.

The current Ebola epidemic illustrates the need for increased focus on hospital epidemiology and infection prevention programs worldwide. Increased resources for infection prevention programs are needed to improve response not only to Ebola but to countless other infectious diseases and healthcare-associated infections (HAIs) that threaten our patients and healthcare workers. Strong infection control programs – led by trained hospital epidemiologists, serving as disease detectives in the hospital – are necessary to prevent, control and prepare hospitals for the spread viruses such as Ebola and MRSA in hospitals. Robust infection control programs improve patient care, protect healthcare workers and ultimately save the healthcare system money.

As a matter of national security, we need to put a greater emphasis on appropriately funding infection prevention and control efforts at the national, state, local and facility level to better equip our frontline defense to Ebola and emerging diseases. Appropriate hospital-based resources – including a team of hospital epidemiologists, infection preventions and other specialty trained healthcare workers – are just as important to the control of Ebola and other infectious diseases outbreaks as national and state public health resources like CDC and state and local health departments.

The collaboration of state and local health departments, laboratories, targeted Ebola Treatment Facilities, and local hospitals is critical to effective preparedness and ongoing treatment. SHEA feels strongly that increased resources are needed to ensure this effective collaboration among facilities to strengthen preparedness and infection control efforts. During this outbreak, our members have worked daily with public health departments to ensure consistent and proper guidance and protocols are adhered to in order to protect the public and healthcare workers.

SHEA strongly supports the Administration’s request for $333 million to go to the Public Health and Social Services Emergency Fund (PHSSEF). The CDC and state and local health departments are vital for controlling the spread of deadly viruses and supporting hospital-based infection prevention teams in on-the-ground response efforts. The current public health emergency has strained many healthcare facilities already limited infection control resources. Hospital epidemiologists and infection control teams are working tirelessly to prepare their facilities for Ebola. This reduced focus on everyday common patient safety priorities could put patients at risk for routine healthcare-associated infections and antibiotic-resistant bacteria. We also believe that funding cuts over the past few years have jeopardized our response to possible pandemics as a country and that immediate investment is necessary in order to prepare the healthcare community.
Investments now will improve pandemic preparedness for Ebola or whatever virus would develop in the United States, leading to safer hospitals in the future through reduced healthcare-associated infections, like MRSA and other emerging antibiotic-resistant infections.

The vital work of the National Institutes of Health (NIH) and the Food and Drug Administration (FDA) to speed the procurement and testing of vaccines and therapeutics to eradicate EVD o is essential to containing the epidemic in West Africa and preventing other outbreaks in other countries. Dedicating these emergency funds to these federal agencies for this work ($238 million to the NIH and $25 million to the FDA) enables their efforts and protects the American public. Additionally, investing in the science now may help enable researchers to prepare for the next possible outbreak.

SHEA appreciates the opportunity to comment on the U.S. government’s response to fighting Ebola and protecting America, and urges Congress to support and effective and science-driven approach to this ongoing public health emergency.

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